

## **MEDICAL UNIT LEADER**

**7520**

(Revised 1996)

The Medical Unit leader is primarily responsible for the development of the Medical Emergency Plan, obtaining medical aid and transportation for injured and ill incident personnel and for preparation of reports and records. The Medical Unit may also assist Operations in supplying medical care and assistance to civilian casualties at the incident.

## **MEDICAL UNIT LEADER'S RESPONSIBILITIES**

**7520.1**

(Revised 1996)

The following are minimum responsibilities for the Medical Unit leader:

- Obtain a briefing from Service Branch director or Logistics chief.
- Participate in Logistics Section/Service Branch planning activities.
- Determine the level of emergency medical activities performed prior to activation of the Medical Unit.
- Activate the Medical Unit.
- Prepare the Medical Emergency Plan (ICS 206).
- Prepare procedures for a major medical emergency.
- Declare a major medical emergency as appropriate.
- Respond to requests for medical aid.
- Respond to requests for medical transportation.
- Respond to requests for medical supplies.
- Prepare an injury log.
- Notify the Safety Officer and the Compensation/Claims Unit of any injury.
- Maintain the Unit Log (ICS 214).

## **MEDICAL UNIT LEADER'S 12-HOUR CHECKLIST**

**7520.2**

(Revised 1996)

## **BRIEFING INFORMATION**

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- ☐ Agencies assigned
- ☐ Anticipated # of personnel
- ☐ Location of ICP, base, camps, etc.
- ☐ Transportation routes
- ☐ Transportation vehicles:
  - ☐ vans
  - ☐ buses
  - ☐ private pickups
- ☐ Photocopy in camp
- ☐ Communications:
  - ☐ base radio
  - ☐ HTs
  - ☐ telephone
  - ☐ mobile phone
  - ☐ FAX
  - ☐ computer
- ☐ Access from base to line
- ☐ Helibase location
- ☐ Maps
- ☐ Closest medical facilities
- ☐ Closest burn center
- ☐ Predicted weather conditions
- ☐ Security problems
- ☐ Potable water availability to unit
- ☐ Sanitation:
  - ☐ chemical toilets
  - ☐ garbage cans
  - ☐ to unit
- ☐ Power source

## **ORGANIZATION**

**7520.3**

(Revised 1996)

The Medical Unit leader reports to the Service Branch director or the Logistics chief. The Medical Unit leader may organize the unit with the following personnel: Assistant Medical Unit leader, Ambulance Operation, and Emergency Medical Technicians.

## **PERSONNEL**

**7520.4**

(Revised 1996)

The number of personnel needed to perform the major functions and responsibilities assigned to the Medical Unit varies based on the general staff and Service Branch director's requirements. The size and complexity of the incident also must be considered when staffing the unit.

- The Medical Unit leader is located at the base/ICP.
- One Assistant Medical Unit leader is located at each camp.
- A minimum of one ambulance unit may be located at each camp and base. Costs can be prohibitive to the operation, so evaluate needs carefully, particularly if there is an ambulance service in close proximity.

## **MAJOR PROCEDURES**

**7520.5**

(Revised 1996)

The Medical Unit leader is an integral part of any incident base operation. Not only must the welfare and medical needs of the incident personnel be met, but on some major incidents the Medical Unit must be able to step in and operate the incident until the Operations Section is fully functional.

## **PLANNING**

**7520.5.1**

(Revised 1996)

Participate in Service Branch planning:

- As requested by the Service Branch director, attend Branch and/or Logistics Section operational planning meetings.
- Provide information and advice concerning Medical Unit activities, as requested.

## **WORK MATERIALS**

**7520.5.2**

(Revised 1996)

A set of materials consisting of forms, manuals and incidental supplies will be available in the logistics supply kit located at the Supply Unit. Other supplies may be included in a medical cache or provided by the host agency.

## **MEDICAL ACTIVITIES**

**7520.5.3**

(Revised 1996)

Determine the level of emergency medical activities:

1. Obtain information from the incident commander/Logistics chief on any injuries or deaths which occurred prior to your arrival. Identify and record the following: type, number, cause, disposition, agency/civilian.

2. Obtain required additional information about the incident by contacting involved personnel or witnesses.
3. Contact the local agency for information that is not available from incident personnel or witnesses.

## **ACTIVATE MEDICAL UNIT**

**7520.5.4**

(Revised 1996)

- Determine the expected scope and location of incident operations by reviewing the Incident Action Plan and Logistics Section operational instructions.
- Determine the Medical Unit activities required to support incident operations:
  1. The number and location of aid stations.
  2. The number and location of stand-by ambulances and medical personnel to assign to the incident.
  3. Special medical problems or hazards.
  4. Medical supplies that may be required.
- Inventory current medical supplies.
- Compare estimates of required supplies with current inventories.
- Request additional medical personnel through the Service director or Logistics chief.
- Order additional supplies from the Supply Unit.
- Establish aid stations.
- Request stand-by ambulance and personnel through the Service director or Logistics chief.

## **MEDICAL PLAN**

**7520.5.5**

(Revised 1996)

Prepare the Incident Medical Plan (ICS 206):

- Identify the medical aid stations to be located at incident facilities.

- Identify and assign ambulances and other emergency medical transportation available at the incident.
- Identify incident personnel who should be notified in the event of any medical emergency on the incident.
- Prepare specific instructions for personnel to use in requesting medical aid.
- Prepare the Incident Medical Plan for attachment to the Incident Action Plan.
- Request the safety officer to review and sign the Medical Plan.

## **MEDICAL EMERGENCY**

**7520.5.6**

**(Revised 1996)**

A major medical emergency can happen at any incident. To deal with these emergencies, the following must occur:

**It is essential that the Medical Unit leader be able to respond immediately to any major (multi-injury) medical disaster.** To do so, the leader must prepare detailed procedures to be followed. Items to consider:

1. Incident hospital locations, including those with burn centers.
2. Names and phone numbers of hospital contacts.
3. Helicopter landing facilities at above (hospital) locations.
4. Ground access capabilities at the incident during operational period.
5. Locations for the pick up of incident medical personnel to transport to the incident scene.
6. Special equipment.
7. Know which incident-assigned ground and air resources could be adapted to be used for medical evacuation in an emergency.

Identify and list medical transportation sources available from off-incident location.

**Determine the specific procedures for handling a major medical emergency and include:**

1. The responsibilities and assignments of incident and agency off-incident personnel.

2. Established procedures with incident communications center for requesting clear command frequency for declaring a major medical emergency.

## **DECLARING A MAJOR MEDICAL EMERGENCY**

**7520.5.7**

(Revised 1996)

The magnitude of the situation will be the determining factor in declaring a major medical emergency. When the number of incident personnel involved exceeds that which can properly be treated and/or transported by personnel of the incident's Medical Unit, a major medical emergency should be declared. Declaration procedures are as follows:

- Notification of events requiring emergency medical services.
- Review information obtained to assess magnitude and severity.
- Immediately evaluate medical care needed for the situation.
- Determine the need for declaration of major medical emergency.
- Declare a medical emergency and perform the following actions, as appropriate:
  1. Have the incident communications center notify the general staff.
  2. Request logistical and tactical resources needed to accomplish objectives.
  3. Recommend changes to priorities stated in Incident Action Plan.
  4. Request hospital triage team.
  5. Request physicians, nurses and other trained personnel.
  6. Activate appropriate hospital emergency communications network.
- Arrange for transportation for evacuation.
  1. Dispatch directly if Medical Unit vehicles are used.
  2. Contact Air Operations director for use of incident aircraft.
  3. Contact appropriate Operations Section personnel for use of incident ground vehicles.
  4. Contact the local agency dispatch center for use of transportation equipment external to the incident.

5. Contact ground support for use of transportation equipment available in the camp or base.

## **REQUEST FOR MEDICAL AID**

**7520.5.8**

(Revised 1996)

In the normal activity of an incident, the Medical Unit leader must be aware of the procedures for requesting medical aid from the incident. These procedures are:

- Receive normal request for aid from the Incident Communications Center or by personal contact. Obtain the following information:
  1. The location of the problem.
  2. The type of problem.
  3. The magnitude of the problem, numbers of persons.
- Determine appropriate action:
  1. Provide first-aid at the pre-established aid station.
  2. Provide first-aid at a remote location.
  3. Provide transportation to a medical facility.
  4. Provide on-scene paramedical care.
- Take appropriate action.

## **MEDICAL SUPPLIES**

**7520.5.9**

(Revised 1996)

The personnel on the incident may request medical supplies from the Medical Unit. The procedures are:

- Receive requests for medical supplies.
- Determine if requested items are in the Medical Unit inventory.
- Provide items to the requesting party, if available, and update the inventory.
- If an item is not in the inventory, determine the disposition of the request.
  1. Order the item through the Supply Unit.

2. Give alternative instructions to the requesting party.
- All medication and first aid supplies for inmate crews will be handled by the Department of Corrections.

## **MEDICAL REPORTS**

**7520.5.10**

**(Revised 1996)**

Most of the work that the Medical Unit leader will be doing will be report writing and inventory. The procedures for gathering information and writing reports are:

- Contact the agency dispatch and/or agency representative to obtain specific instructions for handling emergency medical care and agency forms.
- Collect the required information and prepare injury reports:
  1. The name and agency of person receiving medical support.
  2. The type and extent of injury.
  3. The action taken by the Medical Unit.
  4. The name of the injured employee's supervisor.
- If the injured employee is from another agency, provide information to the liaison officer for use in notifying the home agency of each person released from duty because of injury or illness.
- Receive and evaluate requests for additional medical information.
- Provide requested information, if authorized.



## **REPORT FLOW**

**7520.5.11**

(Revised 1996)

Submit reports to the Service director or Logistics chief as directed.

- Gather information to include in the report by/from:
  1. Monitoring work progress.
  2. Personal observation.
  3. Reports from subordinates.
- Report shall include such information as:
  1. Current activities.
  2. Planned activities.
  3. Anticipated resources/supply requirements.
  4. Current/anticipated problems.
  5. Significant emergency medical situations.
- Assemble and submit information as appropriate to the safety officer and/or the Compensation/Claims Unit.

## **UNIT LOG**

**7520.6**

(Revised 1996)

The Unit Log (ICS 214) will be started by the Medical Unit leader as soon as the leader arrives at the base. The leader will keep the log up to date and turn it in to the Service director or Logistics chief at the end of each operational shift. The Unit Log is used to record:

- Events that occur in the Medical Unit operation.
- The Medical Unit's staff.
- Names and times of injuries.
- Medical treatment.

- Thefts, losses and usages.
- Times and dates reports are submitted.
- Orders of resources and supplies.

## **DEMOBILIZATION**

**7520.7**

(Revised 1996)

The following are Medical Unit procedures during the demobilization process.

### **A. Demobilization concept for Medical Unit:**

1. The Medical Unit will be providing support to the Demobilization Unit.
2. The Medical Unit log must be turned in to the Documentation Unit after the incident is over.

### **B. Closing down satellite Medical Units.**

1. Coordination is required between the Logistics chief, Medical Unit and Planning Section.
2. Orderly closure of camp's Medical Unit.
  - With several camps, close each one when not needed.
  - Consolidate at base the supplies and personnel from the closed camp(s).
  - Maintain enough help to utilize excess and/or return to the Supply Unit.
3. Maintain a system to account for personnel and supplies moved from closed camp(s).

### **C. Providing lists of resources and supplies recommended for release.**

1. The Logistics chief will brief the Medical Unit leader on the following:
  - Demobilization Plan.
  - Priorities for release.
  - Procedures.

2. The Medical Unit leader will prepare a list on anticipated demobilization work. The list will include:

- What equipment can be returned.
- What supplies are surplus.
- Which people are no longer needed.
- What the release priorities are for unit staff.
- Inventories.

D. Reductions of Medical Unit functions.

1. The Medical Unit leader must develop schedules for personnel and equipment release.
2. The unit must have up-to-date inventories.
3. Have the unit fully staffed to meet Demobilization Plan requirements.

E. Returning the unit site to pre-incident conditions.

1. Check on any departmental regulations with the Facilities Unit leader.
2. Reserve personnel to clean up and repair the area. Coordinate with the Facilities Unit leader.
3. Document unusual conditions that could lead to claims or lawsuits.
4. Leave the area as close to its original condition as possible.

F. Release all Medical Unit personnel to the Demobilization Unit.

1. Prepare a list which shows resources (i.e., type, quantity, location, time of release, name and home base).
2. Make sure the Medical Unit can close down within the time frames stipulated in the Demobilization Plan.
3. Have the Logistics chief personally inspect progress and accomplishments prior to release.
4. Have the Facilities Unit leader and Medical Unit leader check the unit's site for any damage.

5. Have subordinate personnel's evaluations completed for the Logistics chief review.
  6. Submit the Medical Injury Log to the Documentation Unit after review by the Logistics chief.
- G. Notify the Logistics chief of the closure of the Medical Unit.

**FORMS AND/OR FORMS SAMPLES: RETURN TO ISSUANCE HOME PAGE FOR FORMS/FORMS SAMPLES SITE LINK.**

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